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441—57.2(249) Requirements for reimbursement. The county agency must have a written agreement with the department of human services in order to receive reimbursement for interim assistance payments. The agreement must be on Form 470-1948, Interim Assistance Reimbursement Agreement, or Form 470-3857, Interim Assistance Reimbursement Agreement (Veterans Affairs). This agreement will provide that:

- **57.2(1)** The county agency will secure written authorization from the individual for the Commissioner to withhold the individual's initial payment or initial posteligibility payment and make these payments payable to the county agency using Form 470-1950, Initial Interim Assistance Reimbursement Authorization, or Form 470-2551, Posteligibility Interim Assistance Reimbursement Authorization. The individual shall also use these forms to indicate intent to apply for SSI benefits. The county agencies are designated by the Commissioner to accept these forms which protect the individual's filing date for SSI benefits.
- **57.2(2)** Interim assistance must be paid utilizing the same standards used for other recipients provided assistance by that county agency.
- **57.2(3)** The county agency will pay to the individual within ten days from the date it receives reimbursement any interim assistance reimbursement it received in excess of the interim assistance the county furnished to or on behalf of the individual.
- **57.2(4)** The county agency will provide the individual with a written explanation of the apportionment on Form 470-1949, Interim Assistance Notice of Apportionment, showing the amount of the payment received by the county agency from the Social Security Administration, the amount retained by the county agency for reimbursement and the excess amount, if any, due the individual and provide the individual with the right to a hearing before the county board of supervisors or the county commission of veterans affairs on disputes arising from the apportionment of the payment.
- **57.2(5)** The county agency shall maintain a file for each individual who has received interim assistance and maintain adequate records of all transactions made relating to interim assistance and the apportionment of the individual's initial payment. The following records shall be maintained for each individual:
 - a. *Identification*. Name, social security number, address, telephone number.
- b. Assistance furnished. Date paid, amount of payment, to whom paid, needs covered by the payment, county warrant number.
- c. Reimbursement check. Date received from the Social Security Administration, amount of the check, amount withheld as reimbursement, amount paid to the individual, county warrant number, date paid to the individual.
 - d. Disputes. Date received, issue, action taken, resolution.
- e. Documentation. Copy of authorization form executed by the individual, apportionment document received by the Social Security Administration, notice of apportionment forwarded to the individual, all pertinent correspondence to and from the individual, copy of SSI award notice, correspondence related to vendor payments made.

Records shall be maintained for a period of five years subsequent to the date of receipt by the county agency of interim assistance reimbursement and shall be available to the department of human services or the Social Security Administration on request.

- **57.2(6)** The county agency must comply with the provisions of 45 CFR 205.50 relating to the safeguarding of information concerning individuals to whom payment of excess interim assistance reimbursement is made pursuant to subrules 57.2(2) and 57.2(3).
- **57.2(7)** The county agency shall submit to the department of human services such reports as the department may need to comply with requirements of the Social Security Administration in the form and at times prescribed by the department.
- **57.2(8)** The county agency or the department of human services may terminate the agreement at any time upon 30 days' written notice to the other party. If the agreement is terminated by either party, the department of human services and the county agency agree that all cases for which the county agency has obtained Form 470-1950, Initial Interim Assistance Reimbursement Authorization, or Form

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470-2551, Posteligibility Interim Assistance Reimbursement Authorization, shall be processed by the county agency in accordance with the agreement.

57.2(9) The agreement shall begin on a date mutually satisfactory to the department of human services and the county agency. It will extend for a period of 12 months from that date at which time it will be automatically renewed for successive periods of 12 months thereafter unless the county agency or the department of human services gives written notice not to renew at least 30 days before the end of the current period.